State of Minnesota District Court County of Judicial District: Court File Number: Case Type: Criminal State of Minnesota, Notice of Hearing and Plaintiff **Petition for Expungement** VS. (Sealed Records) MS 609A.03 Defendant/Petitioner Or **Inherent Authority Notice of Hearing** Notice To Law Enforcement/Prosecutor: Any objection to expungement in this case shall be filed with the court as soon as possible, and within 60 days. This matter is scheduled for hearing on ______(date) at _____ (time); at _____ (location). **Petition for Expungement** 1. I state under oath that I am petitioning the court for expungement (sealing) of a criminal record. 2. My full name, and all other legal names or aliases I have been known as, are: 3. My date of birth is:

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	The following are all of the addresses I have lived at since the date of the offense for which I am seeking expungement: (street address, city, state)
í.	I am seeking expungement because (include whether expungement is sought for employment or licensure purposes, the statutory or other legal authority under which expungement is sought, and why expungement should be granted):
·.	My criminal record including all charges, convictions, stays of adjudication or imposition of sentence and pending actions for misdemeanors, gross misdemeanors or felonies in this state, another state, federal court, or a foreign country, whether the conviction occurred before or after the offense for which expungement is sought, consists of:
	Case# County-State Type of Charge Date of Offense Conviction (Y/N) Date (If Yes)
•	I have no criminal records, other than listed at #6, in this state or elsewhere.

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9.	I qua	I qualify for an expungement because:				
		A criminal case against me for a controlled substance violation has been dismissed and the proceedings have been discharged (use Order Sealing Record/Conviction);				
			was certified or referenced for prosecution as an adult for a crime I committed when I as a juvenile (use Order Sealing Record/Conviction);			
		A criminal matter was reso Records/No Conviction);	olved in my favor (use Order Concerning Sealing of			
			e rehabilitated myself. The benefit to me outweighs the c and the burden on the court (use Order Sealing			
10	. Th	ne details of the offense I w	vant to expunge are: Case #	Jurisdiction/City		
wh	ere t	he offense occurred:		Type of		
Offense:Date of Offense:						
Th	is wa	s a conviction or a di	smissal. Date of conviction or dism	issal:		
13	ntact	order prohibiting me from co	ent or prior order for protection, restontacting the victims (attach copies ense, I have taken the following work, or other personal history:	of any orders to petition). g steps toward personal		
Or	, 🔲	there was no conviction for	this offense.			
Dat			Signature (Sign only in front of nota			
Sw	orn/a	iffirmed before me this	Name:			
		day of				
		·	City/State:			
			Zip Code:			
Notary Public \ Deputy Court Administrator		olic \ Deputy Court Administrator	Telephone:			

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